FOR INSTRUCTIONS, SEE BACK OF FORM DISCLOSURE SUMMARY PAG			FORM	
		37831	DR-2 (Rev. 07/2003)	DISCLOSURE REPORT
COMMITTEE NAME (Must be same as on Statement of Organ			,	Only
SITIPAC	#9664		For Office Use (9664
IMPORTANT: Indicate type of committee you are reporting for: 2			Logged In	f
(1) Statewide/Legislative Candidate (2) Statewide PAC (3) State Party	4 \County/Local Candidate		Scanned	·<
(5)County PAC (6)Ballot Issue/Franchise Committee (7)County/City (]	Computer K	<u>ix</u>
CANDIDATE COMMITTEES ONLY:			Addited	
Candidate Name	Political Party			
Office Sought	District (if Senate or House))	13	EC 2 7 2004
			ÇON	
Trinam When	515.327.557	9	12	-22-04
SIGNATURE OF TREASURER (or person filing this report)	TELEPHONE		DATE	SIGNED
Late filed reports are subject to	nossible civil and cr	iminal	nonalties	
SEE INSTRUCTIONS ON BACK AND COMPLETE THE	•		periantes.	
I AM FILING A	REPORT FOR AN/A (1) EL		N //2\NON_ELE	CTION VEAD
(report date)	Indicate and	.EC 1101	1 /(2)11011-ELE	OHON TEAR.
☐ CHECK IF AMENDMENT TO REPORT DATED 12-31	ing mulcate one			5.7 (5
CHECK IF AMENDMENT TO REPORT DATED	-03	Local	Committees, enter	Date of Election
Check if this is final (termination) report and attach Notice of	Dissolution Form DR-3	County	& Local Committ	ees, enter County in
(You must continue to file reports until a Notice of Diss		which I	Election is held	•
STATEMENT	OF CASH ON HAND			
CASH ON HAND at the beginning of the reporting period. (Thi		14		
by the committee. This amount MUST be the same a	s the cash on hand at the en	d	1	11.36
of the last reporting period, or must be zero if this is fir	st report filed.)	************	.\$	
ADD TOTAL MONEY TAKEN IN THIS PERIOD				00.00
Schedule A: Cash Contributions total (Attach Schedu				
Schedule F: Loans Received total (Attach Schedule F				
Schedule H: Total Sales of Campaign Property (Attac (Schedule H applies to Candidates' Comm	•	••••••	•	
(Schedule if applies to Candidates Contin	SUB-TO	TAI	4	11.36
SUBTRACT TOTAL MONEY SPENT THIS PERIOD	305-10	15-4-	· ************************************	
Schedule B: Expenditures total (Attach Schedule B) (**alen egg dehte and inane h	alou)		6.36
Schedule F: Loan Repayments total (Attach Schedule		•		
CASH ON HAND at the end of this reporting period (if final report	•			05.00
be zero) (Attach DR-3)			.\$	05.000
**UNPAID BILLS (From Schedule D - Attach Schedule D)			.\$	
*IN KIND CONTRIBUTIONS (From Schedule E - Attach Sched				
**OUTSTANDING LOANS (From Schedule F - Attach Schedul	•		•	
CANDIDATE COMMITTEES ONLY:	,			
CONSULTANT BREAKDOWN (Schedule G Attached?)				YES NO
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attac	ch Schedule HI		s ->	

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)		
SITIPAC	#9664	

SCHEDULE	
A (Rev. 07/03)	MONETARY RECEIPTS
	CK THIS BOX IF NDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD,

CAUTION: Section 68B.32A(6), lowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
11.04.03	CK#	Richard Kirsner 5403 Harwood Drive Des Moines, IA 50312	None	\$ 100.00	
10.31.03	ID# CK#	Christian Guerney 4622 - 96th Street Urbandale, IA 50322	None	100.00	
10.29.03	ID# CK#	Brice Oakley 418 - 38th Place Des Moines, IA 50312	None	100.00	
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID#				
	ID#				
	ID# CK#				
	ID# CK#				
		TOTAL (if last page	SUB-TOTAL e of this schedule)	\$ \$300.00	

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page _____ of ____ (for Schedule A) FOR INSTRUCTIONS, SEE BACK OF FORM

ASSESSMENTS.	

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
	CK THIS BOX IF NDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)	
SITIPAC	#9664

			117004		
DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED	
	ID#				
	CK#	Wells Fargo	Bank Service Fees for this period.	6. 36	
	ID#				
	CK#				
	ID#				
·	CK#				
 	ID#				
	CK#				
	ID#				
•	CK#				
	ID#				
	CK#				
	ID#				
	CK#				
	ID#				
	CK#				
······································	L	1	SUB-TOTAL	\$	
			TOTAL (if last page of this schedule)		
			I O I PE (II last page of titls solieding)	\$ 6.36	

นเร	S RAY	(APPI	IFS TO	CANDIC	YATES	COMMITTEES	· V IMO S

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 68A.402(3)(i).)

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Page		OI	

			1 ASK
FOR INSTRUCTIONS, SEE BACK OF FORM			FORM
DISCLOSURE SUMMARY	PAGE Reset Fo	rm	DR-2 DISCLOSURE
COMMITTEE NAME (Must be same as on Statement	of Organization)	(R	ev. 07/2003) REPORT
SITIPAC			r Office Use Only
IMPORTANT: Indicate type of committee you are reporting f		Lo	gged In
(1)Statewide/Legislative Candidate (2)Statewide PAC (3)Statewide/Legislative Candidate (2)Statewide PAC (3)Statewide PAC (3)S		1 1	anned
(5) County PAC (6) Ballot Issue/Franchise Committee (7) Cou	unty/City Central Committee		mputer /// dited
CANDIDATE COMMITTEES ONLY:	A CONTRACTOR OF THE PROPERTY O	ļ ļ	
Candidate Name	Political Party	1	14.
			MAR
Office Sought	District (if Senate or House) ' ' ' ' ' ' ' ' ' ' ' '	~ 200g
		1	M3-1
A			MAR 2 2004 3-1-04 DATE SIGNED
Thuram Whas	515,205,21	6/	3 / - 0 4 DATE CIONED
SIGNATURE OF TREASURER (or person filing this	report) TELEPHONE		DATE SIGNED
Late filed reports are su	bject to possible civil and cr	iminal pe	enalties.
SEE INSTRUCTIONS ON BACK AND COMPLE	-	-	
I AM FILING A January 19, 200			2)NON-ELECTION YEAR
(report date)	Indicate one		
CHECK IF AMENDMENT TO REPORT DATED		Local Com	mittees, enter Date of Election
	14 M 1 4 1 4 1 4 1 4 1 4 1 4 1 4 1 4 1 4	Local Com	minutes, enter bate of Election
Check if this is final (termination) report and attach l (You must continue to file reports until a Notice			ocal Committees, enter County in tion is held
STATE	MENT OF CASH ON HAND		
CASH ON HAND at the beginning of the reporting period by the committee. This amount MUST be the of the last reporting period, or must be zero if	same as the cash on hand at the en	d .	117,72
ADD TOTAL MONEY TAKEN IN THIS PERIO			7
Schedule A: Cash Contributions total (Attach		·)	300.00
Schedule F: Loans Received total (Attach Sc	, ,	•	
Schedule H: Total Sales of Campaign Proper	•		
(Schedule H applies to Candidates	• •		
		TAL\$	417.72
SUBTRACT TOTAL MONEY SPENT THIS P Schedule B: Expenditures total (Attach Sched	ERIOD	•	
Schedule B: Expenditures total (Attach Schedule B)	dule B) (**also see debts and loans b	elow)	12,72
Schedule F: Loan Repayments total (Attach S			
CASH ON HAND at the end of this reporting period (if	final report, balance must		. /
be zero) (Attach DR-3)		\$	405.00
**UNPAID BILLS (From Schedule D - Attach Schedule			
*IN KIND CONTRIBUTIONS (From Schedule E - Attac	·		
**OUTSTANDING LOANS (From Schedule F - Attach	·		
CANDIDATE COMMITTEES ONLY:		Ψ	
CONSULTANT BREAKDOWN (Schedule G Attached)	?)		L YES NO
VALUE OF CAMPAIGN PROPERTY (From Schedule	•	c	

For Instructions, See Back of Form

CONTRIBUTIONS MONEY TAKEN IN	(Rev. 07/03)	MONETARY RECEIPTS	
(Including candidate's personal funds) COMMITTEE NAME (Must be same as on Statement of Organization)		CK THIS BOX IF NDING FORM	
SITIPAC	<u> </u>		

SCHEDULE

Reset Form

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), lowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
10-29-03	l	Brice Oakley 418-38th PL. Des Moines IA 50312		\$ 100	
10-31-03	1D# 9664 CK# 1576 ID# 9664	Christian Gurney		# 100	
11-4-03	OICH	Urbandale, IA 50322 Richard Kirsner 5403 Harwood Dr. Des Moines, IA 50312		# 100	
	ID# CK#				
:	ID# CK#				
			SUB-TOTAL	Zon	

TOTAL (if last page of this schedule)

Page _____ of _____

^{*} Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES				
CHECK THIS BOX IF AMENDING FORM					

COMMITTEE NAME	(Must be same as on Statement of Organization,

	SITIPO				
DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURP (DESCRIBE TR		AMOUNT EXPENDED
9-17-03	ID# CK#	Wells Fargo Bank Service Fee	Bank S	ervice Eee	\$ 3,18
10-17-03	ID# CK#	le //	* *		3.18
11/19/03	ID# CK#	11 /1		1	3.18
12/16/03	ID# CK#	, , ,	1,	<i>,</i>	3.18
	ID# CK#				

SUB-TOTAL

\$ 12.72

TOTAL (if last page of this schedule)

12.72

			-				
THIS	BOX	APPLIES TO	C	ANDID	ATES	COMMITTEES	ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 68A.402(3)(i).)

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Page		of	 !